# HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)

NAME (Last, First, Middle)

STATE POSITION HELD: (Dept/Div or Board/Commission)

SAKAMOTO, NORMAN L

STATE SENATOR
TERM OF OFFICE (Begin/End):

11-02/ 11-06

FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN. USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

## ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
F	SC PACIFIC CORP/ROLL-A-WAY SHUTTERS OF THE PACIFIC	Е	CONTRACTOR
F.	91-178 KALAELOA BLVD KAPOLEI HI 96707 STATE LEGISLATURE	D	SENATOR ·
e,	STATE CAPITOL HONOLULU HI 96813		SEVATOR
SP	SC PACIFIC CORP/ROLL-A-WAY SHUTTERS OF	ס	OFFICE MANAGER
and the second	THE PACIFIC 91-178 KALAELOA BLVD KAPOLEI HI 96707		
JT	PENELOPE A SAKAMOTO ETAL	D	RENTAL INCOME
DC	1248 ALA MAHAMOE ST HONOLULU HI 96819 KATHERINE E SAKAMOTO	В	STUDENT RESIDENT ASST
	1248 ALA MAHAMOE ST HONOLULU HI 96819		BIODINI INDIDINI IDDI

[Check here if entry is None

[ ]Check here if additional sheets are attached

### ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business incorporated, regulated, or licensed to carry on business in the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

F,SP, DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
F	SC PACIFIC CORP/ROLL-A-WAY SHUTTERS OF THE PACIFIC 91-178 KALAELOA BLVD KAPOLEI HI 96707	GENERAL CONTRACTOR STORM SHUTTERS	100% OWNERSHIP	I
DC	SAKAMOTO FAMILY PARTNERSHIP 96-1385 WAIHONA STREET PEARL CITY HI 96782	REAL ESTATE	PARTNERSHIP	В

]Check here if entry is None

[ ]Check here if additional sheets are attached

## ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD	DATE OF TRANSFER			
[X]Chec	[X]Check here if entry is None [ ]Check here if additional sheets are attached				

## **ITEM 4: CREDITORS**

List the name and address of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding (excluding debts arising out of retail transactions or the purchase of consumer goods).

F,SP, DC,JT	NAME OF CREDITOR AND ADDRESS	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING
JT JT	BANK OF HAWAII BANK OF HAWAII PO BOX 3650 HONOLULU HI 96811-3650	B G	A F
JT	BANK OF HAWAII PO BOX 2715 HONOLULU HI 96803-2715	G	E

# ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

organizati	on, the term of office, and the annual compen-	Salion.		
F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
F	SC PACIFIC CORP/ROLL-A-WAY SHUTTERS OF THE PACIFIC 91-178 KALAELOA BLVD KAPOLEI HI 96707	PRES, TREAS	ANNUAL	NONE
SP	SC PACIFIC CORP/ROLL-A-WAY SHUTTERS OF THE PACIFIC 91-178 KALAELOA BLVD KAPOLEI HI 96707	SEC	ANNUAL	NONE

[ ]Check here if entry is None

[ ]Check here if entry is None

[ ]Check here if additional sheets are attached

[ ]Check here if additional sheets are attached

#### ITEM 6: INTERESTS IN REAL PROPERTY HELD IN THE STATE

List interests in real property in	the State, held during	ng the disclosure period, if the interest has a value of \$10,000 or more.	

F,SP, DC,JT	STREET ADDRESS		TAX MAP KEY NUMBER	VALUE
JT JT	1248 ALA MAHAMOE STREET 1241 ALA MAHAMOE STREET 2125 AUHUHU STREET	HONOLULU HONOLULU PEARL CITY	1-1-026-083-0000 1-1-1-026-059 1-9-7-051-037	I H H
·	•			
[ ]Chec	k here if entry is None		[ ]Check here if additional	sheets are attached

## ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED

List interests in real property in the State, acquired during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION	
[X]Chec	[X ]Check here if entry is None [ ]Check here if additional sheets are attached			

# ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED

List interests in real property in the State, transferred during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION
[x]Check h	nere if entry is None	[ ]Check here if a	dditional sheets are attached

FORM D-201

#### ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT	NAME OF STATE AGENCY

#### ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F,SP,DC,JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
			704 APR 16 P12:37	RECEIVED
[X]Check here if entry is None [ ]Check here if additional sheets are attached				

**CERTIFICATION:** I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

N Sakemsto

APRIL 12, 2004

DATE